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ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

THE YEAR 1949

WESTMORLAND COUNTY COUNCIL



ANNUAL REPORT

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COUNTY OF WESTMORLAND.

Public Health Department,

County Hall, Kendal.

September, 1950.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1949.

The Vital Statistics of the County present no dramatic changes and are, therefore, worthy of brief comment. The Birth Rate still shows a slight tendency to rise but, as in previous years, is below the general rate for England and Wales. Likewise, the Death Rate is appreciably above that for the past year and is still above the Death Rate for England and Wales. The trend in both Birth and Death Rate is easily understood when it is realised that the Lake District attracts elderly and retired people from the more industrial parts of the country.

The Infant Mortality Rate has shown a considerable improvement and is on a par with the rate for the rest of the country. It would only be fair to state that with the relatively small numbers in Westmorland a considerable fluctuation in statistics must inevitably occur. Nevertheless, it is a matter of considerable satisfaction that the Infant Mortality Rate is so low. Its progress will be watched with considerable interest, because one feels that the irreducible minimum is not far away. I am glad to report that the Maternal Mortality Rate remains low.

Two interesting points are noteworthy in regard to Infectious Disease. The one is the complete absence of Diphtheria and the other the relatively low number of Poliomyelitis cases notified. As in the epidemic of two years ago the cases have nearly always occurred in the scattered farming community in the rural parts of the County. There were small epidemics of Scarlet Fever, Measles and Whooping Cough.

In reviewing the work done under the National Health Service Act, the Immunisation Campaign against Diphtheria is working satisfactorily. The work is largely done by the County Medical Staff. Vaccination is entirely done by the general practitioners; the latter is showing a diminution in popularity in Westmorland as elsewhere.

The Ambulance and Hospital Car Service has been used to a considerable extent during the past year and the former, at any rate, has proved adequate to the task. The provisions for ambulances have been satisfactory, in that they have been able to undertake all the calls made on them. The bulk of the work has undoubtedly fallen on the Kendal Station, but good use has been made of the other ambulances stationed in the more remote parts of the County. The Hospital Car Service has continued to function well on its voluntary basis. It has, however, been necessary to supplement the voluntary cars by means of taxis. This has been especially the case in the North of the County where the numbers of voluntary car drivers have been insufficient for the task. The use of this Service has grown by leaps and bounds and there is no indication that it has reached its peak.

The Nursing Services, which in Westmorland embrace Health Visiting, Midwifery and District Nursing, have flourished under the National Health Service set up when it was taken under the aegis of the Local Authority. The car situation, although it leaves much to be desired, has greatly improved under the priority scheme. The nurses have appreciated the change of administration and we have had no nurses leaving the district on this account. The arrangements for their welfare, including housing, relief, and supervision, are much more satisfactory. I regard the Council's action in providing for better housing in general for the nurses to be an important step forward. The Health Visitor and Queen's Scholarship Scheme, which was started this year, whereby two nurses can go through the Health Visitors' and Queen's course free of cost to themselves, has been taken full advantage of. Owing to the increase of work in this Service an Assistant Superintendent has been appointed.

The Care of Mothers and Young Children: All the Welfare Centres have been well attended during the past year and it can be said that the County is now adequately covered by these Centres. The attendance figures are quite satisfactory in view of the sparse population. There have been signs, however, that the antenatal clinic is ceasing to attract patients. In the same way the midwives throughout the County report a decline in domiciliary midwifery and, further, that the midwife is tending to act in the capacity of maternity nurse rather than midwife.

The Home Help Service is linked with the Nursing Services and the Superintendent Nursing Officer acts as Supervisor of Home Helps. This entirely new service has fulfilled a vacancy and is greatly appre-

ciated throughout the County. We have so far been fortunate in being able to supply help in most cases where it has been needed.

The Mental Health Service has worked really satisfactorily during the past year. This work was previously undertaken by a voluntary body and is now done by an Officer of the Council. Thus, the administrative part of the Service is on a much more satisfactory footing and, on the whole, there has been much closer co-operation both with hospitals and with the patients themselves than ever before. The opening of the handicraft class in Kendal has proved a great boon to those patients who have been able to attend. The Mental Health Worker also acts as a Duly Authorised Officer.

Prevention and Rehabilitation: This is one of the sections of the National Health Service Act under which there have not been any important developments to report. The work done under this Section of the Act has been chiefly confined to after-care of the tuberculous, provision of convalescent treatment to general hospital cases and provision of extra nourishment.

The milk supply in Westmorland shows a gradual improvement and the County has now the highest proportion of Attested Herds in England. Likewise, the water supply in the County has improved and a number of small water schemes are on foot, although it will be appreciated that in a scattered rural County like Westmorland water schemes are necessarily small and, through serving a relatively small population, tend to be expensive.

I would like once again to thank the Committee for its continued support and the Staff of the Department for their loyalty.

I have the honour to be,

Your obedient Servant,

JOHN A. GUY,

County Medical Officer of Health.

PUBLIC HEALTH OFFICERS OF THE AUTHORITY IN 1949.

Name.	Qualifications.	Office.	Whole or		Other Offices.
			Part	Time.	
John A. Guy	.. .. M.D., D.P.H.	County Medical Officer	Whole		School Medical Officer.
C. Fleming	.. .. M.B., Ch.B., D.P.H.	.. Deputy County Medical Officer	Whole		Deputy School Medical Officer,
F. M. Taylor	.. .. M.R.C.S., L.R.C.P., (Lond.)	Asst. County Medical Officer	Whole		Asst. School Medical Officer.
J. Munro Campbell	.. .. M.B., Ch. B., D.P.H.	.. Tuberculosis Officer	Part		Physician Superintendent, Meathop Sanatorium.
John Irvine	.. .. L.D.S.	.. Senior Dental Officer.	Whole		Senior School Dental Officer
D. H. Watson	.. .. L.D.S.	.. Assist. Dental Officer. (Resigned 30.4.49).	Whole		Assist. School Dental Officer
C. Parkinson	.. .. L.D.S.	.. Assist. Dental Officer. (Resigned 8.3.49).	Whole		Assist. School Dental Officer
A. S. Carter	.. .. M.R.C.S., L., R.C.P., L.D.S.	.. Assist. Dental Officer. (Appointed 1.9.49)	Whole		Assist. School Dental Officer
M. N. Burgess	.. .. B.A.	.. Psychiatric Social Worker (Resigned 31.7.49)	Whole		
E. M. Thomas	.. .. S.R.N., S.C.M.	.. Superintendent Nursing Officer	Whole		

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres, land and inland water)	504,917
Population (Registrar-General's estimate of Resident Population, mid-1949)	66,400
Total Rateable Value as on 1st April, 1949	£451,706
Estimated product of a Penny Rate (General County) for the financial year 1949-50	£1,806

EXTRACTS FROM VITAL STATISTICS IN THE YEAR 1949.

	Total.	Males.	Females.
Live Births—Legitimate	996	511	485
Illegitimate	57	24	33
	<hr/>	<hr/>	<hr/>
Total births	1,053	535	518
	<hr/>	<hr/>	<hr/>

Birth Rate per 1,000 of the estimated resident population ... 15.9
 Birth Rate, England and Wales 16.7

	Total.	Males.	Females.
Stillbirths	30	18	12
Rate per 1,000 total live and stillbirths, 27.71.			

	Total.	Males.	Females.
Deaths	938	452	486
Death rate per 1,000 of the estimated resident population, 14.14			
Death Rate England and Wales, 11.7.			

Deaths from Diseases and Accidents of Pregnancy or Child-
 birth:—

Puerperal Sepsis	1
Other Puerperal Causes	Nil

Rate per 1,000 total (live and still) births, for the
 purpose of calculating Maternal Mortality, 0.95.

Maternal Mortality Rate, England and Wales, per
 1,000 total (live and still) births, 0.98.

Death Rate of Infants under one year of age:—

All infants per 1,000 total live births	33.23
Legitimate infants per 1,000 legitimate live births	32.13
Illegitimate infants per 1,000 illegitimate live births	52.63

Infant Death Rate, England and Wales, 32.

Deaths from—	1948.	1949.
Cancer (all ages)	135	121
Measles (all ages)	—	1
Whooping Cough (all ages)	—	1
Diarrhoea (under two years)	—	2

POPULATION.

DISTRICT.	Area in acres (Land and Inland Water).	Population.
		Registrar General's estimate Mid.-1949.
URBAN.		
Appleby	1,877	1,720
Lakes ...	49,917	5,290
Kendal	3,705	18,320
Windermere ...	9,723	6,420
RURAL.		
North Westmorland	288,688	16,940
South Westmorland	151,007	17,610
Westmorland ...	504,917	66,400

BIRTH RATE, 1948 and 1949.

Birth Rate per 1,000 estimated resident population:

District.				Birth Rate 1948.	Birth Rate 1949.
Urban.					
Appleby	..	..	..	15.1	15.1
Kendal	..	..	..	15.9	15.2
Lakes	..	..	..	12.7	11.0
Windermere	..	..	..	14.8	15.3
Rural.					
North Westmorland			..	17.1	17.9
South Westmorland			..	15.0	16.4
Westmorland	..	..	..	15.6	15.9
England & Wales	..	..	..	17.9	16.7

Live Births registered in the last five years were as follows:—

Year	...	...	...	1945	1946	1947	1948	1949
No. of births	...	...	...	946	1,179	1,222	1,039	1,053

DEATH RATE, 1947, 1948 and 1949.

Death Rate per 1,000 estimated average population.

District.			Death Rate. 1947.	Death Rate. 1948.	Death Rate. 1949.
URBAN.					
Appleby	...	...	19.3	10.1	12.7
Kendal	...	...	12.4	13.7	13.3
Lakes	...	...	17.2	13.4	13.0
Windermere	...	...	12.7	11.6	12.9
RURAL.					
North Westmorland	...	...	14.9	12.5	13.1
South Westmorland	...	...	14.1	12.4	11.4
WESTMORLAND	...	...	14.1	12.7	12.7
ENGLAND and WALES	...	...	12.0	10.8	11.7

The Death Rates for 1947 and 1948 are the crude figures, but those for 1949 are calculated using the Comparability Factor provided for the purpose by the Registrar-General.

The chief causes of death in Westmorland in 1947, 1948 and 1949, in order of maximum fatality in 1949, were as follows:—

			No. of deaths 1947.	No. of deaths 1948.	No. of deaths 1949.
Heart Disease	...	...	282	291	341
Cancer	...	...	137	135	121
Cerebral Haemorrhage	...	...	140	114	120
Violence	...	...	24	35	41
Digestive Diseases	...	...	31	27	40
Other Circulatory Diseases	...	...	30	42	35
Bronchitis	...	...	39	22	33
Nephritis	...	...	32	23	24
Tuberculosis of the Respiratory System	...	...	16	17	20
Pneumonia	...	...	23	11	17
Other Respiratory Diseases	...	...	15	9	14

MATERNITY AND CHILD WELFARE.
INFANTILE MORTALITY. (Under 1 Year.)

Rate per 1,000 Live Births.

District.			1947.	1948	1949.
URBAN.					
Appleby	...	...	24.4	41.7	Nil.
Kendal	...	...	35.7	44.7	50.4
Lakes	...	...	44.0	15.2	Nil.
Windermere	...	...	8.2	20.8	20.4
RURAL.					
North Westmorland	...		24.4	41.4	23.0
South Westmorland	...		36.8	44.1	41.5
WESTMORLAND	...		22.1	39.5	33.2
ENGLAND and WALES	...		41.0	34.0	32.0

ILLEGITIMATE INFANT DEATH RATE.

Rate per 1,000 illegitimate Live Births.

			1947.	1948.	1949.
WESTMORLAND	...		40	67.80	52.63
ENGLAND and WALES	...		59	45.34	46.0

Causes of Death in Infants under 1 year in 1949:

						Number of Deaths.
Prematurity	...	...	...	...	...	8
Infections	...	...	...	...	...	12
Congenital abnormalities	...	...	...	...	...	12
Conditions consequent on difficult birth	...	...	...	...	...	1
Intestinal obstruction	...	...	...	...	...	2

DISTRICT MIDWIFERY, HEALTH VISITING AND HOME NURSING.

Prior to 5th July, 1948, the County Council's duties in respect of Health Visiting, Tuberculosis Visiting, School Nursing and Domiciliary Midwifery outside Kendal, were performed through the agency of the Westmorland County Nursing Association and its affiliated District Nursing Associations, who employed a total of 33 District Nurse-Midwives.

From the Appointed Day, however, the County Council took into direct employment all the District Nurse Midwives and carried out all these functions directly, utilising the local knowledge and experience of the Nursing Associations through the local District Nursing Committees which have been appointed.

Apart from the fact that the staff undertaking these duties have, since the appointed day, been employed directly by the County Council, the most notable change in regard to these services is the extended scope of the "Health Visiting." Instead of being restricted as hitherto to the supervision and care of expectant and nursing mothers, and children under five years of age, the Health Visitor is now responsible for advising on the care of any member of the household suffering from illness, and particularly with regard to the prevention of the spread of infection. These additional functions of the Health Visitor are not intended to overlap, but rather to supplement, those of the family doctor, sanitary inspector and home nurse.

Supervision of Midwives.

As advised in Ministry of Health Circular 118/47, the County Council appointed a Superintendent Nursing Officer to co-ordinate the work of the midwifery, home nursing and health visiting services, and this officer was also appointed Non-Medical Supervisor of Midwives. The Assistant County Medical Officer was designated Medical Supervisor of Midwives.

As a result of the National Health Service Act, the Kendal Corporation ceased to be a Child Welfare Authority, and to facilitate the future administration of the service, the responsibility for this work was in fact transferred to the County Council on 1st January, 1948. Because of this change, and also the wider changes brought about by the Act, the figures given in various parts of this report will often be seen to differ considerably from those given for previous years.

The Statistical Tables at the end of this report are a simplified version of the Annual Return to the Ministry, and whilst they are presented in the same form as those for 1948 it should be observed that the figures are not comparable, in that those for 1948 covered only the period 5th July to 31st December, whilst those for 1949 cover the whole of that year.

The figures below relate, however, to complete years.

Domiciliary Maternity Nursing.

	1949.	1948.	1947.
Number of Midwifery cases ...	104	119	173
Number of Maternity cases ...	228	216	238
	<hr/>	<hr/>	<hr/>
	332	335	411
	<hr/>	<hr/>	<hr/>

Infant Welfare.

	1949.	1948.	1947.
Total Health Visits to Infants			
under 1 year	7,626	7,615	6,267
Total Health Visits to Children 1-5			
years	9,530	8,837	6,721

DIPHTHERIA IMMUNISATION.

Immunisation against diphtheria, previously the responsibility of the County Council and District Councils concurrently, is now the responsibility of the County Council alone. The treatment is given, either by the County Council medical staff or the general practitioners according as the parents choose, at or before the first birthday, whilst all parents are urged to consent to their children receiving a reinforcing dose on attaining the age of 5 years.

The success of this scheme may be judged from the fact that for the second consecutive year there were no cases of diphtheria notified amongst residents of the County, compared with, for example, 21 notifications and 2 deaths in 1937. Details of children immunised during the year, including those receiving reinforcing doses, are given below:—

Children aged 5-15 years old ...	855
Children below 5 years old ...	732
	<hr/>
Total ...	1,587
	<hr/>

VACCINATION AGAINST SMALLPOX.

With the coming into effect of the National Health Service Act, the Vaccination Acts, 1871-1907, were repealed, the offices of Vaccination Officer and Public Vaccinator were abolished, and it became the duty of the Local Health Authority to make arrangements for the vaccinations against smallpox of all persons who need or desire this treatment.

It is the duty of the Health Visitors to urge all parents to have their children vaccinated as soon as practicable after birth, and all medical practitioners in the County were given an opportunity of carrying out this treatment under the County Council's arrangements. A record of the treatment is sent to the County Medical Officer, and fees are payable in respect of each report received.

Lymph is supplied free through the Public Health Laboratory Service, and the Council has also taken power, in its proposals, to make such special arrangements as may be necessary in the event of a threatened epidemic of smallpox.

Details of vaccinations carried out during 1949 are:—

Under 5 years old	...	...	...	...	372
Over 5 years old	...	...	...	...	82
					<hr/>
					454
					<hr/>

INFANT WELFARE CENTRES.

Details of Infant Welfare Centres in operation at the end of the year are given below:—

Area.		Centre Held At:	Frequency of Sessions.
Ambleside	..	Y.M.C.A.	.. Monthly.
Appleby	..	Old First Aid Post	.. Fortnightly.
Bampton	..	Church Hall	.. Monthly.
Bowness-on-W'mere	..	Rayrigg Room	.. Monthly.
Burneside	..	Bryce Institute	.. Monthly.
Calgarth	..	Social Centre	.. Monthly.
Kendal	..	School Clinic, Stramon-gate	.. Weekly.
Kirkby Stephen	..	Friends' Meeting House	.. Fortnightly.
Milnthorpe	..	Institute Annexe	.. Monthly.
Orton	..	School	.. Monthly.
Shap	..	Methodist Chapel Hall	.. Monthly.
Staveley	..	Working Men's Institute	.. Monthly.
Tebay	..	Methodist Chapel Hall	.. Monthly.
Temple Sowerby	..	Church Hall	.. Monthly.
Windermere	..	Y.M.C.A.	.. Monthly.
Wickersgill	..	Social Centre	.. Monthly.

Once again thanks are due to the local branches of the British Red Cross Society, the St. John Organisation, and all other voluntary workers, for their assistance in the running of the Centres.

Attendances at Centres.

			1949.	1948.	1947.
Under 1 year	...	...	2,535	3,282	1,711
Over 1 year	...	...	4,736	2,389	1,654
Average per session	...	...	25.9	15.1	19.9

Unmarried Mothers and Their Children.

Although on 5th July, 1949, when the Children Act came into operation, Miss Thurman, who had previously been employed as Social Worker, took up the new appointment of Children's Officer, she continued, with the consent of the Children Committee, to investigate and advise these cases on behalf of the Health Committee.

Births of Illegitimate Children notified	31
--	-----	-----	----

Confinements in:—

Mother's own home	...	...	12
St. Monica's Maternity Home	..	...	9
Brettargh Holt Maternity Home	...	...	1
Helme Chase Maternity Home	...	...	2
Westmorland County Hospital	...	...	2
Kendal Green Hospital	...	...	4
Private Nursing Home	...	...	1

Disposal of Infants:—

Mother keeping baby in own home	...	...	17
Mother found resident post with baby	...	...	1
Adoptions arranged or pending	...	...	9
Mother and baby with putative father	...	...	1
Baby placed with foster parents	...	...	1
Baby admitted to Brantfield Nursery	...	...	1
Baby died	...	...	1

Institutional accommodation for these cases is provided under arrangements made with the undermentioned voluntary homes:—

St. Monica's Maternity Home, Kendal.

The Home possesses 23 maternity beds, and during the year 70 maternity cases were admitted, nine of whom were domiciled in Westmorland.

Sacred Heart Maternity Home, Brettargh Holt, Kendal.

This Home has 40 maternity beds, and during the year 105 maternity cases were admitted, none of whom were, however, domiciled in Westmorland.

In the case of both of the Homes, the apparently low number of admissions relative to the number of beds is largely explained by the fact that patients are admitted at least a month before confinement and retained for at least two months afterwards, so as to afford an opportunity for the making of arrangements for the care of the babies.

Care of Premature Infants.

The following table gives details of premature infants born in the County during 1949:—

Premature births notified	...	...	...	35
Number of domiciliary births	...	...	...	8
Number who died within 24 hours	...	...	...	1
Number who survived one month	...	...	...	6
Number transferred to hospital	...	...	...	1
Number of private nursing home births	...	...	...	2
Number who survived one month	...	...	...	2

Details regarding the progress of babies born prematurely in hospitals are no longer available.

REGISTRATION OF NURSING HOMES.

(Sections 187 to 194 of the Public Health Act, 1936.)

There were 9 registered homes at the end of the year providing beds for 84 maternity patients and 74 other patients. They have been inspected at regular intervals and, with the exception of one home, were found to be satisfactorily run.

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN.

As the result of the resignation of two more dental officers early in the year, and the inability to replace these officers, it was not possible to do any more than the barest minimum of dental treatment. The remaining members of the staff found all their time much more than fully occupied with school dental treatment. Until such time as the staff can be increased, no further treatment is being offered to expectant and nursing mothers and pre-school children.

SENIOR DENTAL OFFICER'S REPORT, 1949.

			Expectant mothers.		Nursing mothers.		Children under 5 yrs.
(a) Examined	...	...	8	...	2	...	10
(b) Requiring treatment	...	...	8	...	2	...	10
(c) Treated	...	...	8	...	2	...	10
(d) Made dentally fit	...	...	8	...	2	...	10
Total visits to clinic	...	...	61	...	4	...	20
Extractions	...	...	43	...	—	...	17
Fillings	...	...	—	...	1	...	22
General anaesthetics administered	...	...	6	...	—	...	3
Scalings	...	...	—	...	2	...	—
Dressing	...	...	—	...	1	...	—
Other operations	...	...	55	...	—	...	1
Dentures provided	...	...	16	...	—	...	—

THE PUERPERAL PYREXIA REGULATIONS, 1939.

During 1949 two cases of Puerperal Pyrexia were notified; both were transferred to hospital where they recovered.

DOMESTIC HELP SERVICE.

In January, 1946, the County Council inaugurated Home Help and Domestic Help services for the assistance of maternity and other sick cases respectively, the scheme being the particular responsibility of the Social Worker; the Home Help and Domestic Help Schemes were distinguished for accountancy purposes only. When preparing their proposals under the National Health Service Act, the Council, on the advice of the Minister, took advantage of their power under Section 29 of the Act, to provide a Domestic Help Service, available as far as workers can be obtained to the categories of household specified in the Act. The service is now the responsibility of the Superintendent Nursing Officer, and its steady expansion of itself testifies to the previously unsatisfied need in this direction. Statistical details are shown in Table II on page 41.

MIDWIVES' ACTS.

Total number of Midwives practising at the end of the year	...	58
District Nurse Midwives	... ..	37
Whole-time Midwives	... ..	1

Midwives in Institutions and in Private Practice, 20, viz.:—

(a) Westmorland County Hospital	... ..	4
(b) Helme Chase Maternity Home	... ..	4
(c) St. Monica's Maternity Home, Kendal	... ..	3
(d) Brettargh Holt	... ..	2
(e) Kendal Institution	... ..	1
(f) Private Practice:—		
Institutions	... ..	5
Domiciliary	... ..	1

Midwives' Notification Forms received during 1949 were as follows:—

Notification of sending for Medical Aid	...	38
Notification of Artificial Feeding	... ..	16
Notification of Stillbirth	... ..	4
Notification of Death	... ..	2
Notification of having laid out a dead body	...	3
Notification of liability to be a source of infection	... ..	5

Gas Air Analgesia.

The policy of the County Nursing Association was to train as many midwives as possible to administer gas and air, those nurses who had the largest number of cases and were anxious to qualify being selected first for the training courses.

The Council's proposals for the provision of a midwifery service, approved by the Minister, require that all midwives shall be trained and equipped for the induction of analgesia, and this policy is being pushed forward as quickly as vacancies on training courses can be obtained and Relief Staff made available during the period when the midwives are away on the course.

During the year midwives have induced Analgesia in 181 domiciliary cases, and at the end of the year 29 District Nurse Midwives were qualified for the induction of Gas-Air Analgesia.

AMBULANCE SERVICES.

Before 5th July, 1948, ambulance services were operated by various authorities in the County as follows:—

Kendal	...	...	2 ambulances
Ambleside	...	..	1 ambulance
Kirkby Stephen	...	1	do.
Appleby	...	...	1 do.
Windermere	...	...	1 do.
Arnside	...	...	1 do.
Penrith	...	...	1 do.

In planning their service to operate from the appointed day, the County Council decided to operate the necessary ambulances directly, except that a part of the north of the County (detailed in the Table below) is covered by the Penrith Ambulance Station of the Cumberland County Council. In an effort to promote efficiency and economy the Chief Fire Officer has also been appointed County Ambulance Officer and is responsible for the servicing, maintenance, communications and staffing of the Ambulance Service, though a proposal that ambulance drivers and attendants should be engaged also as members of the Fire Brigade has, after consultation with the Ministry of Health and the Home Office, now been rescinded.

Ambulances are now stationed as below:—

Ambulance Station No.	Location of Station.	No of Ambu- lances.	Staff.	Area Served.	Pop., 1931.
1.	Kendal Fire Station	3	4 whole- time and retained	Kendal Borough .. Windermere U.D. South West'd R.D. North West'd R.D.: Parishes of Orton Tebay	16316 6083 17548 795 977
					<hr/> 41719
2.	Ambleside Commercial Garage	1	Retained	Lakes U.D. (except Patterdale Ward Lancashire (part) Ulverston R.D.: Parishes of— Claife Hawkshead Skelwith	5004 265 614 490
					<hr/> 6373
3.	Appleby Commercial Garage	1	Retained	Appleby Borough North West'd R.D. All parishes except those served by Stations 1, 4 and 5	1618 5177
					<hr/> 6795

4.	Penrith (Service to be provided by Cumber- land County Council)	1	Retained	North West'd R.D.: Parishes of Mar- tindale Bamp- ton, Shap. Shap Rural, Thrimby, Lit. Strickland, Gt. Strickland, Lowther, Ask- ham, Barton, Sockbridge, Yanwath, Clif- ton, Brougham Lakes U.D.: Patterdale Ward	5340 817 <hr/> 6157
5	K. Stephen Commercial Garage	1	Retained	North West'd R.D.: Parishes of Brough, Brough Sowerby, Crosby Garrett, Hartley, Hillbeck, Kaber, Kirkby Stephen, Mallerstang, Musgrave, Nate- by, Ravenstone- dale, Soulby, Stainmore, Wait- by, Wharton, Winton	5129 <hr/> 5129

The Council decided further that their sitting-case car scheme should be based on the Voluntary Hospital Car Service, and operated under the aegis of the British Red Cross Society, but even after the very considerable increase in the number of enrolled volunteers which has been secured it is now quite impossible for this voluntary service to meet the demands placed upon it, and recourse has had to be made to the services of commercial car-hire firms and taxi proprietors.

Details of the work done by the ambulance and sitting-case cars are given in Table VII on page 44.

CARE OF BLIND PERSONS.

Under the National Assistance Act, 1948, the County Council no longer has the power to give financial assistance to blind persons, but it is required to "make arrangements for promoting the welfare" not only of blind persons, but also of the partially sighted. Administrative responsibility for this work devolves upon the Council's Social Welfare Department, but the County Medical Officer is responsible for advising the Committee on "all matters relating to health or medical services arising in connection with the Council's functions under the Act . . . including, in particular, arrangements for the medical examination of applicants for registration as blind persons."

All such applicants are referred for examination to one of the specialist ophthalmologists with whom the Council has entered into arrangements for this work, and during 1949 twenty such cases were referred, of whom seventeen were certified as blind, and three as partially sighted.

The total number of Blind Persons on the Council's register on 31st December, 1949, was 104.

MENTAL HEALTH.

As advised in Ministry of Health Circular 100/47, the Health Committee has appointed a Mental Health Sub-Committee to deal with its functions under Section 57 of the National Health Service Act, and, so far as they relate to Mental Defectives and Persons of Unsound Mind, under Section 28 of that Act. The Sub-Committee is constituted as follows:—

Chairman and Vice-Chairman of the Health Committee ...	2
Members of the Health Committee (being members of the County Council)	10
Members of the Management Committees of Mental Hos- pitals and Mental Deficiency Institutions	4
Others (whether members of the Health Committee, or the County Council, or neither)	3

Duties Under the Mental Deficiency Acts.

On the 5th July, 1948, this Authority took over from the Cumberland, Westmorland and Carlisle Joint Committee for the Care of the Mentally Defective the duty of ascertaining what defectives in the area were subject to be dealt with under the Acts, and the duty of providing supervision, care, training and occupations for defectives living in the community. Four officers have been authorised to place persons in a place of safety, under Section 15 of the Mental Deficiency Act, 1913, of whom two have also been authorised to present petitions under that Act.

The County Medical Officer and the Assistant County Medical Officer have each been approved by the Local Health Authority under Section 3 of the Mental Deficiency Act, 1913, for the purposes of giving certificates relating to Mental Defectives. The Authority also employed in connection with its Mental Health Services a Psychiatric Social Worker, but when Miss Burgess resigned on 31st July, 1949, it was impossible to secure another qualified officer, and a Mental Health Worker was eventually appointed, but did not commence duty until 1st January, 1950.

The Authority has undertaken, on behalf of the Regional Hospital Boards, the supervision of cases on licence from Institutions who are resident within the area, and also the domiciliary visiting, as and when required, for patients in Institutions and Homes whose parents and friends are resident in Westmorland.

During the latter part of the year opportunity was taken to review all the Case Papers received on the "Appointed Day" from the Cumberland, Westmorland and Carlisle Joint Committee for the Care of the Mentally Defective, and to ascertain the present whereabouts of many of the cases regarding whom no information was available over a long period. A few Westmorland cases were discovered in various Institutions and many others, previously ascribed to this county, were transferred to the Authorities properly responsible for them. A simplified version of the Annual Return to the Ministry, given on pages 39 and 40 of this Report, shows the number of cases for which the Council was responsible at the end of the year.

Occupation Centre.

An Occupation Centre was opened in Kendal early in the year for one session each week for male and female patients. The numbers attending were, as expected in such a sparsely populated area, small—3 males and 4 to 7 females—but progress was made in the teaching of rugmaking, embroidery, reading, writing, etc.

Both patients and their relatives are very enthusiastic regarding the progress made, and the latter appreciate being relieved of the responsibility for looking after the patients for a few hours each week. The standard of work in some cases was much higher than had been expected, whilst one of the male patients learned to make simple brooches sufficiently well to continue with the work at home and to sell a considerable number at Christmas.

The Psychiatric Clinic run by Dr. Braithwaite in Kendal one day fortnightly continued, although it was moved to alternative premises under the control of the Lancaster and Kendal Hospital Management Committee. During the year 29 new cases and 26 return cases attended.

Early in 1950 the Hospital Management Committee made alternative arrangements for the medical direction of this clinic and increased the attendances to one half-day weekly.

The Mental Health Worker attends these sessions and does any visiting which may be required on behalf of patients in or discharged from the various Mental Hospitals.

She has also, from time to time, been asked by other Social Agencies and others to visit and advise in cases where the problem is thought to be of a psychiatric nature.

Transport of Patients.

In the case of patients who are acting, or who appear likely to act, violently, the Council's Ambulance Service is used for their removal to Hospital, but docile cases are taken by taxi under arrangements made with a car hire firm in Kendal.

ANNUAL REPORT OF THE COUNTY ANALYST.

1. During the twelve months ended the 31st December, 1949, I have analysed 353 samples of Food and Drugs submitted by the Sampling Officers appointed for the County of Westmorland, under the Food and Drugs Act, 1938, and by the Chief Sanitary Inspector for the Borough of Kendal, viz.:—

From the Administrative County Area	251
From the Borough of Kendal	... 102
	<hr/>
	353
	<hr/>

Compared with the year ended the 31st December, 1948, the number of samples submitted from the Administrative County Area shows an increase of 9, and a decrease of 9 in the number of samples from the Borough of Kendal, so that the total number of samples received for analysis is exactly the same as in 1948.

2. I have certified 281 samples to be of genuine quality, 11 samples to be of genuine quality but below standard, and 36 samples to be adulterated or below standard or disclosing some irregularity, while 26 samples of milk taken as appeal to cow samples have also been the subject of report.

3. The outcome of the analysis of samples submitted during 1949, including all those which were found not to be of genuine quality, or to disclose some other irregularity, is shown in the following table:

Number of Milk samples received for analysis	...	227
Number of samples other than milk received for analysis	... ..	126
		<hr/> 353 <hr/>
Number of samples adulterated or below standard or showing some irregularity	... ..	36
Number of samples of genuine quality but below standard	... ..	11
Number of informal samples	... ..	59
Number of appeal samples	... ..	25
		<hr/>

In 1948 the number of samples adulterated or below standard or showing some irregularity was 33, genuine samples below standard were 40, and informal samples amounted to 100, with 15 appeal samples.

4. **Milk.**

Altogether 30 samples of milk were found to fall below standard, 6 samples being deficient in both non-fatty solids and in fat, 16 samples were deficient in non-fatty solids only and 8 samples were deficient in fat.

In 9 cases in which the deficiency in non-fatty solids was proved to be due to the addition of water, proceedings were instituted and convictions were recorded; one vendor was cautioned and in 6 of the samples no proceedings were instituted.

Where samples were found to be deficient both in non-fatty solids and in fat summonses were issued in five cases and convictions were recorded in 4, while one case is pending at the date of this report, and no action was taken in connection with the remaining sample.

The 8 samples disclosing deficiency in fat were dealt with by one cautioned, while the other 7 were noted for further sampling.

The percentage of adulteration for milk during 1949 was 14.85; for the year ended the 31st December, 1948, it was 11.81.

5. **Other Samples.**

Samples of articles other than milk to the number of 126 were received during the 12 months ended the 31st December, 1949, an increase of 11 compared with the number submitted during 1948.

These were mostly representative of samples of food, or of commodities used in the preparation of food and spirits.

Of these samples 6 were the subject of adverse reports and comprised a sample of Devon Cream Toffee, which was noted for further investigation, 2 samples of Beef Sausages, both informal samples and disclosing deficiencies of 2 per cent. and 8 per cent. in meat content respectively, one Yorkshire Pudding and Pancake Mixture which was mite-infested, and two samples of Whisky.

The percentage of adulteration for the year ended 31st December, 1949, is 10.97; for the twelve months ended the 31st December, 1948, it was 9.55.

CYRIL H. STOCK,

County Analyst.

Food and Drugs Act, 1938.

Annual Report of Sampling Officer for the Year 1949.

During the period 1st January to 31st December, 1949, in the County area, excluding the Borough of Kendal, the total number of food samples analysed by the Public Analyst was 251. Of these, 35 (or 13.9 per cent.) were unsatisfactory. The total of 251 comprises 163 of milk and 88 of food products other than milk.

Milk Samples.

The Sale of Milk Regulations, 1939, provide that where milk contains less than 3 per cent. of milk fat or less than 8.5 per cent. of milk solids other than fat, it shall be presumed not genuine by reason of the abstraction of fat, or solids not fat, or by the addition of water, until the contrary is proved.

When a sample of milk is below standard it is followed up by further reference samples and by making tests of the milk from the herd of cows milked under supervision at a corresponding milking.

The milk samples as classified in tabular form on page 26 consist of routine samples from retailers and samples taken from churns of milk in transit as a result of information gained by making informal on the spot tests of the contents of large numbers of churns. The results of such informal tests are not in themselves conclusive, but they have proved to be very useful for the purpose of selective sampling from milk consigned to large dairies.

Out of 163 milk samples submitted for analysis, 101 were genuine, 6 genuine but below standard, 31 unsatisfactory and 25 "Appeal to Cow" samples.

Of the 31 unsatisfactory samples, 3 classified as "Below standard in non-fatty solids" and 2 as "Below standard in fat," were followed up by "Appeal to Cow" samples which indicated that the milk, although below standard, was in fact of the same quality as produced by the herd of cows.

Of the remaining 26 unsatisfactory samples legal proceedings were instituted in 14 cases, 4 warning letters were sent to vendors, and the names of a further 6 vendors were noted for the purpose of obtaining further samples.

Three (3) of the "Appeal to Cow" samples were obtained on request by a nearby local authority and sent to the Public Analyst for this County.

The following contributory causes have from time to time been put forward as possible explanations of fat deficiencies: Uneven milking hours, inefficient stripping, incomplete mixing of milk in churns, and lack of quality and quantity of feeding stuffs.

Milk Samples:

Classification.	Informal.	Formal	Refer- ence.	Appeal to cow.	Total.
Genuine ...	5	91	5	11	112
Genuine, but below stan- dard in non-fatty solids	1	5	—	8	14
Below standard in fat ...	—	6	4	3	13
Below standard in non- fatty solids ...	—	3	—	3	6
Added water ...	2	16	—	—	18
	—	—	—	—	—
Totals ...	8	121	9	25	163
	—	—	—	—	—

Milk Prosecutions:

Total.	In Respect of		Total.
	Fat Deficiencies.	Added Water.	Fines. Costs.
14 ...	— ...	14 ...	£34-0-0 £18-13-6

Milk Prosecutions Pending: Nil.

Samples Other Than Milk.

The 88 samples other than milk were mainly samples of food-stuffs or constituents used in the preparation of food and comprised 79 formal and 9 informal samples consisting of 4 whisky, 2 each of sausage, brawn, gravy browning, Devon Cream Toffee, custard powder, milk pudding, lemon cheese and one each of 70 different other articles.

Unsatisfactory features as indicated by the certificates of analysis were as follows:—

Yorkshire Pudding and Pancake Mixture.—Described as a genuine sample, slightly infested by mites.

Action taken: Stock withdrawn from sale.

Devon Cream Toffee (informal sample).—"An article prepared and described as Devon Cream Toffee should be made with no fat other than butter fat. Of the 20.21 per cent. of fat recovered from the sample, 62.0 per cent. was derived from butter fat."

Action taken: Formal sample obtained which proved to be genuine.

Whisky.—Samples from each of two licensed premises were found to contain not less than 5.65 per cent., and not less than 6.25 per cent., of extraneous water in addition to that permitted under the Food and Drugs Act, 1938.

The remainder of the samples were classified as genuine.

Other than Milk:

Prosecutions.	In Respect of	Total.	
		Fines.	Costs.
2	... Additional water in whisky ...	£8-0-0	£1-15-0

Prosecutions Pending: Nil.

The Labelling of Food Order, 1946.

This Order provides, amongst other things, that the statement on any label on a pre-packed article of food sold by retail shall be a true statement. In this connection the truth of statements of the constituents of pre-packed foodstuffs, as indicated by their respective labels, has been verified where applicable on the certificate of the Public Analyst in respect of samples submitted under the Food and Drugs Act, 1938.

Arising from 268 visits to premises, 3,195 pre-packed articles of food were examined with reference to the Labelling Orders and 97 minor infringements were noted, in respect of which five warning notices were sent to the shopkeepers concerned.

Pharmacy and Poisons Act, 1933.

The sellers of Poisons listed in Part II of the Poisons List are required to obtain a licence in respect of such poisons and to comply with such provisions of the Pharmacy and Poisons Act, 1933, and the Poisons Rules, 1935, as relate to Part II Poisons.

The total number of premises visited under this heading was 153, of which 139 were first or repeat visits, to the premises of listed sellers, and 14 were to traders who afterwards either became listed sellers or ceased to sell Part II Poisons.

The total number of listed sellers of Part II Poisons during the period under review was 181.

The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949, require Pasteurising or Sterilising establishments to obtain annual licences from the Food and Drugs Authority. The licences are issued subject to certain conditions which include methods by which milk is pasteurised or sterilised and prescribe the clinical and other tests to be applied to milk.

The Food and Drugs Authority became the licensing authority on the 1st October, 1949, and, from that date, two samples of pasteurised milk have been obtained in each month from the only pasteuriser's establishment in the county. The samples were submitted to the Department of Pathology, Public Health Laboratory Services, for examination and have been classified as satisfactory in passing the prescribed tests.

A. BRYANT,

Chief Inspector.

NOTIFIABLE DISEASES

A table will be found on page 45 detailing the incidence of these diseases in 1949. The Registrar-General has supplied figures as to the incidence per 1,000 of the estimated average population of notification of certain diseases in 1949 in England and Wales. In the following table the incidence of notification of these diseases per 1,000 of the estimated population of Westmorland is compared with that of England and Wales:—

			Westmorland.		England & Wales.	
			1948.	1949.	1948.	1949.
Typhoid Fever	...	...	—	—	0.01	0.01
Paratyphoid Fever	...	...	—	—	0.01	0.01
Cerebro Spinal Fever	...	...	—	—	0.03	0.02
Scarlet Fever	...	...	0.76	0.50	1.73	1.63
Whooping Cough	...	...	2.10	4.58	3.42	2.39
Diphtheria	...	...	—	—	0.08	0.04
Erysipelas	...	...	0.07	0.13	0.21	0.19
Smallpox	...	...	—	—	—	—
Measles	...	...	9.48	6.45	9.34	8.95
Pneumonia	...	...	0.24	0.41	0.73	0.80
Acute Poliomyelitis	...	...	—	0.26	0.04	0.13
Acute Polioencephalitis	...	...	0.01	0.03	—	0.01
Food Poisoning	...	...	—	0.03	—	0.14

CANCER TREATMENT.

The following details have been supplied by courtesy of the Lancaster and Kendal Hospital Management Committee:—

Number of Clinics held at Kendal during the year			
ending 31st December, 1949	...	...	12
Number of new cases seen	...	...	83
Number of follow-up cases seen	...	...	191
Number of cases admitted to the County Hospital:—			
New cases	...	...	33
Follow-up cases	...	...	3

The only duty now remaining to the County Council under the Cancer Act concerns the prohibition of advertisements relating to the treatment of cancer and to the sale of articles for use in the treatment thereof. The actual treatment of this condition now forms part of the general hospital and specialist services which it is the duty of the Regional Hospital Boards to provide.

Deaths from Cancer, 1948 and 1949.

	1948.			1949.		
	Males.	Females.	Total.	Males.	Females.	Total.
Urban Districts	33	30	63	20	38	58
Rural Districts	25	47	72	28	35	63
			<hr/>			<hr/>
Grand Total ...			135	Grand Total ...		121
			<hr/>			<hr/>

TUBERCULOSIS.

In the following table are the figures for the notifications of, and deaths from, Tuberculosis in 1949.

TUBERCULOSIS IN 1949.

Age Periods.	NEW CASES.				DEATHS			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	—	—	—	—	—	—
1	—	—	2	—	—	—	—	—
5	—	—	2	3	—	—	—	—
15	8	6	2	—	1	1	1	—
25	9	4	—	—	3	5	—	—
35	6	3	—	—	2	2	—	—
45	2	1	1	1	—	1	—	—
55	3	—	—	—	1	1	—	—
65	—	1	—	—	1	3	—	—
TOTAL	28	15	7	4	8	13	1	—
1948	21	23	10	11	6	11	3	4

In 1949, 36 Westmorland patients were admitted to the Westmorland Sanatorium, Meathop.

Nine patients suffering from surgical tuberculosis of the bones or joints received in-patient treatment as follows:—

In the Ethel Hedley Orthopaedic Hospital ...	...	1
In the Oswestry Hospital ...	...	6
In Wrightington Hospital ...	...	2

TUBERCULOSIS SCHEME

Although responsibility for the treatment of tuberculosis patients passed to the Regional Hospital Board on 5th July, 1948, leaving prevention and after-care as the only responsibilities of the County Council, we were fortunate in being able to retain the services and advice of Dr. Campbell, during the change-over period, and although his transfer to the Regional Hospital Board has now somewhat loosened his ties with the Health Department, it is indeed comforting to know that in his new capacity as Chest Physician in the Lancaster and Kendal area he will retain responsibility for the tuberculosis service in the greater part of the county.

The main dispensary was at the Chest Clinic, Fellside School, Kendal, where sessions were held on Mondays, 5 p.m. to 6 p.m., and Fridays, 11 a.m. to 1 p.m. A quarterly session was held at the old First Aid Post, Appleby, from 1-30 p.m. to 3 p.m. on the first Saturday of February, May, August and November, and patients were also seen, by appointment, at Meathop.

Until February, 1947, all X-ray work and out-patient treatment for the county was carried out at the Westmorland Sanatorium, but since then the provision of a Solus X-ray Set at the Kendal Clinic has almost entirely relieved the Sanatorium of this work, though the exposed films from the Clinic are taken to the Sanatorium for developing, as no provision has been made for this in Kendal. Largely owing to this addition to the equipment, the attendances at the Dispensary showed a steady increase.

Pulmonary cases requiring treatment were admitted to Westmorland Sanatorium, though in a few cases transfer to another hospital (such as Chest Unit, Broadgreen Hospital, Liverpool) was made for special operative treatment.

The majority of the adult non-pulmonary cases have been admitted to the Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry, whilst child patients usually go to the Ethel Hedley Orthopaedic Hospital, Windermere.

BOVINE TUBERCULOSIS.

The Tuberculosis Order, 1938, is carried out by the Divisional Inspector of the Ministry of Agriculture and Fisheries, in co-operation with the County Police.

During the period 1st January to 31st December, 1949, 15 animals were slaughtered under the above Order as follows:—

Cows in Milk:—

- 3 Suffered from tuberculous udders,
- 5 suffered from chronic cough,
- 1 with T.B. milk, and
- 2 excreting or discharging tuberculous material.

Other cows:—

- 2 suffered from chronic cough and
- 2 suffered from tuberculous udders.

Compensation to owners is paid by the Ministry of Agriculture and Fisheries.

MILK SUPPLIES.

The Milk and Dairies (Food and Drugs) Act, 1944, remained in abeyance from the date of its enactment until 1st October, 1949, on which date the County Council ceased to be responsible for the licensing of producers of Tuberculin Tested and Accredited Milk.

This Act and the Regulations made thereunder brought about the following position:—

(a) The Ministry of Agriculture and Fisheries became responsible for the registration and supervision of dairy farms (hitherto the responsibility of the County District Councils).

(b) The County District Councils became responsible for the registration and supervision of milk distributors and dairies, other than dairy farms.

(c) The County Council became responsible for the licensing and supervision of pasteurising and sterilising premises (hitherto the responsibility of the County District Councils).

The Minister of Agriculture and Fisheries is now responsible for:—

- (i) The registration and supervision of dairy farms.
- (ii) The licensing and supervision of producers of Tuberculin Tested and Accredited Milk.

The County Council is responsible for:—

The licensing and supervision of pasteurising and sterilising premises.

The County District Councils are responsible for:—

(i) The registration and supervision of milk distributors and dairies, other than dairy farms.

(ii) The licensing of dealers of designated milk.

The Regulations also laid down detailed requirements in the matters of cleanliness of dairies, milk containers, retail vehicles and milk handlers, as well as methods of sampling and testing milk. The powers of Medical Officers of Health to deal with the problem of milk-borne infectious diseases are also strengthened.

It is further provided that all licences to use the designation "Accredited" shall lapse on 30th September, 1954, and shall not be renewable; no new licence to use the designation "Tuberculin Tested" will be granted after 30th September, 1954, unless the herd is Attested, and after 30th September, 1957, all "Tuberculin Tested" licences still in force will apply only to attested herds.

A further stage in the campaign to secure a safe milk supply was reached with the enactment of the Milk (Special Designations) Act, 1949, which provides that in areas specified from time to time by the Minister of Food, no milk may be sold by retail unless it carries one of the special designations.

BACTERIOLOGICAL AND BIOLOGICAL EXAMINATION OF MILK.

Prior to the coming into operation of the afore-mentioned legislation, the systematic examination of milk samples, commenced in November, 1932, continued, and the following figures cover the period 1st January to 31st July, 1949, when the County Milk Committee ceased to function:—

Total Cows.	Samples reported on.		T.B.—Neg. Pos.	
211	...	18	...	18 —

The foregoing figures show that in the biological examination of milk for *Bacillus Tuberculosis*, of the 18 samples representing the milk from 211 cows, no samples were positive.

BACTERIOLOGICAL EXAMINATION OF MILK.

(Methylene Blue Test for Cleanliness.)

		No. of	Satis-	Unsatis-	Neg.	Coliform Bacilli present in 1/100ml.		
	Total	bulk	fac-	fac-	for	1 tube	2 tubes	3 tubes
	Cows.	Samples.	tory.	tory.	B.Coli.			
Non-designated								
Producers	351	51	21	28	25	3	5	7

(Of the 51 samples taken 12 were repeat samples. Result: 11 satisfactory, 1 unsatisfactory.)

Eleven samples of pasteurised milk were tested by the Phosphatase Test and were all satisfactory.

The regular supervision of Tuberculin Tested and Accredited Milk was carried out by the Agricultural Executive Committee on behalf of the County Council.

WATER SUPPLIES.

My Annual Reports for 1947 and 1948 included extracts from the Reports of Dr. F. T. Madge, Medical Officer of Health for the Westmorland (Combined) Districts, on the water supplies in the various parts of the County, and the following comments on the present situation are again compiled from information obtained from the same source:

Appleby Borough.

The public supply is described as adequate in quantity and satisfactory in quality, although pressure in the higher parts of the Borough is said to be rather poor. About two dozen houses are still served only by standpipes.

Kendal Borough.

In this District also the public water supply is adequate and satisfactory; only 45 houses in the Borough are not connected to the Corporation supply system and, of these, 13 are connected to the Thirlmere aqueduct, the remainder depending on private wells and surface sources.

Lakes Urban District.

The public water supply system in this District is restricted to the Ambleside, Grasmere and Chapel Stile areas. Of these supplies Grasmere is unfailing in quantity, Ambleside is adequate except in periods of drought, but the Chapel Stile system runs very short in dry weather and its quality is variable.

Arrangements to augment the latter supply have now been made by pumping additional water from a sumphole in the valley bed near New Bridge.

This scheme is designed for use in times of drought, but could also be used to meet any increased demand caused by extension of the present mains system. A major scheme for both the Langdale valleys, at present under consideration, will, if carried out, supersede both the Meg's Ghyll and New Bridge supplies.

The private supply in Hartsop became defunct in 1948 and was acquired by the Council. After a complete reconditioning during 1949 the scheme appeared to work well.

During the protracted drought measures were taken to provide an emergency supply for Glenridding, where the private supplies had failed.

Although present circumstances preclude a comprehensive survey of the private supplies in the area, distress is evident after no more than a fortnight's dry weather—this in one of the wettest parts of the country—while the quality of many of the supplies is doubtful, to say the least.

Schemes for Patterdale, Troutbeck and the Langdales, which have been under consideration for many years, still remain in the "paper" stage."

Windermere Urban District.

Supplies in this district are reported to be generally adequate in quantity and fairly satisfactory in quality, though some contamination seems inevitable. During the severe drought in the summer of 1949 emergency arrangements for the augmentation of the supply were made by laying a surface main from Borrans Reservoir to the main in Dubbs Rood. The Dubbs supply catchment area is the scene of the annual sheep dog trials and steps were taken to minimise pollution on the occasion of this event, and to exclude sheep from the vicinity of the reservoir.

Dr. Madge reports that the condition of the Ghyll Head Supply has deteriorated, the gathering ground being used by the owners for field craft training and camping, with a risk of pollution. As a safety measure chlorination is proposed until the use of the gathering ground has been satisfactorily settled.

In this area also private supplies, upon which 125 houses are reliant, are thought to be of very variable quality.

North Westmorland Rural District.

Apart from the Bela Water Scheme, mains from which extend into 25 parishes, the Council control and maintain 18 other sources of supply in the whole or part of 31 parishes, but laboratory examinations and chemical analyses carried out during the year have shown that the quality of some, at least, of these supplies is indifferent and the Medical Officer is undertaking personal investigations into all the public sources of supply. The quality and quantity of the many private supplies in the District are also considered to be variable.

The Regional Scheme, the scope of which was restricted by the limited borrowing powers in force at the time of its inception, has for some time been inadequate for the needs of some parts of the area which it serves. To relieve shortages in some of the higher-lying villages new covered reservoirs at Hackthorpe, Newby and Brackenslack and looping of certain sections of the main in the Morland area, were completed during the year, and a definite improvement in supply has resulted.

A scheme for the improvement of the supply in the Bolton area is also in course of preparation.

Plans for improvements and extensions in several areas are in various stages of preparation, but large-scale developments appear unlikely in the near future on economic grounds alone.

South Westmorland Rural District.

In this District the Council's undertakings supply 24 parishes, the Manchester Corporation's Thirlmere Aqueduct supplies some of the houses on its route through 10 parishes, and some of the houses in three parishes draw supplies from Kendal Corporation's mains. Commercial undertakings and private supplies cater for a considerable portion of the District. In 16 parishes there is no organised public or private supply whatever, and Dr. Madge points out that it cannot be assumed that the supplies to the remaining parishes are adequate.

It is hoped that the Lyth Valley, where the supply is particularly bad, will be served by an extension of the main Lupton system during the next few years. The quality of the public supplies, with the exception of that at Natland, is generally good, but many of the private supplies are variable in quantity and suspect in quality.

The proposed scheme to extend the Lupton supply to the Lyth Valley area has received the sanction of the Minister of Health and the Council hopes to make an early start on this urgently needed extension.

During the year small schemes were completed to supply Selside and Skelsmergh from the Haweswater Aqueduct, and the Old Hutton area from the Thirlmere Aqueduct.

TREATMENT OF VENEREAL DISEASES.

Treatment of Venereal Disease has now passed to the Regional Hospital Board. The problem of V.D. has never been a large one in Westmorland. The establishment of the Kendal Clinic has had a useful part to play. The journey to Lancaster or Barrow or Carlisle has deterred a number of patients from having regular treatment, with the result that there was an increase in the number of defaulting patients. The figures supplied show that syphilis has, at any rate temporarily, been greatly reduced. The figures for gonorrhoea can still be improved on.

Westmorland cases treated at the following Centres for the year ended 31st December, 1949, are as follow:—

NEW CASES.					Total No. of attend- ances of all patients residing in Westmor- land.
Centre.	Syphilis.	Soft Chancre.	Gonorrhoea.	Non- venereal & undiagnosed conditions.	
Carlisle	...	—	4	3	38
Kendal	...	3	—	9	28
Blackpool	...	—	—	—	1
	—	—	—	—	—
Total	...	3	—	13	32
	—	—	—	—	—

A Venereal Diseases Clinic commenced at the Fellside Dispensary, Kendal, on the 4th June, 1948, and is attended weekly by Dr. Fessler, of Lancashire.

The session is for two hours—one hour for men and one hour for women.

The following number of new cases (patients transferred from Lancaster are not included), attended the Kendal Clinic during the year 1949:—

Syphilis	...	...	3
Gonorrhoea	...	..	9
N.V.D.	...	...	28
			<hr/>
Total number of attendances			394

MENTAL DEFICIENCY ACTS, 1913-1938.

Particulars of Cases Reported during the Year 1949.

Ascertainment.

			Males.	Females.	Total.
(a) Cases reported by Local Education Authority:—					
(i) As ineducable	...	...	3	4	7
(ii) As needing care and supervision after leaving school	...	...	1	—	1
(b) Other cases found "subject to be dealt with"	...	...	3	4	7
			—	—	—
TOTAL cases found "subject to be dealt with"	..	..	7	8	15
(c) Other cases ascertained but not "subject to be dealt with"	...	...	—	1	1
			—	—	—
Total cases reported during the year			7	9	16
			—	—	—

Disposal of cases reported during the year.

			Males.	Females.	Total.
(a) Ascertained defectives found "subject to be dealt with":—					
(i) Admitted to Institutions	...	...	1	2	3
(ii) Placed under Statutory Supervision	...	...	3	2	5
(iii) Died or removed from area	...	...	—	1	1
(iv) Action not yet taken	...	...	3	3	6
			—	—	—
Total	...	...	7	8	15
(b) Cases not at present "subject to be dealt with":—					
(i) Placed under Voluntary Supervision	...	...	—	1	1

MENTAL DEFICIENCY ACTS, 1913-1938.

Particulars of Mental Defectives on 31st December, 1949.

		Males.	Females.	Total.
(1) Number of Defectives found "subject to be dealt with":—				
(a) In Institutions—				
Under 16 years of age	...	3	6	9
Aged 16 years and over	...	52	42	94
(b) Under Guardianship—				
Under 16 years of age	...	—	1	1
Aged 16 years and over	...	1	2	3
(c) Under Statutory Supervision—				
Under 16 years of age	...	3	2	5
Aged 16 years and over	...	11	11	22
(d) Action not yet taken under (a) to (c) above	...	3	3	6
		—	—	—
TOTAL number of defectives "subject to be dealt with"	...	73	67	140
		—	—	—

Included in (b) to (d) above are 7 cases (4 male and 3 female) who are awaiting removal to an Institution.

(2) Number of Defectives under Voluntary Supervision:—

		Males.	Females.	Total.
Under 16 years of age	...	—	1	1
Aged 16 years and over	...	17	31	48
		—	—	—
Total	...	17	32	49
		—	—	—

TOTAL number of defectives (1) and (2) above	90	99	189
--	-----	-----	-----	----	----	-----

RATS AND MICE (DESTRUCTION) ACT, 1919.

The Rodent Operatives have been fully occupied during the year 1949: 328 operations have been carried out and the estimated number of rats killed was 1,335 and mice 894. Fifty Annual Contracts have been entered into, totalling a sum of £187 3s. 9d.

Under the Prevention of Damage by Pests Act, 1949, which comes into operation on the 1st of April, 1950, the duties of pest destruction will be transferred to the District Councils and the services of the two Rodent Operatives will be dispensed with on the 31st March, 1950,

STATISTICAL TABLES.

The following tables are a simplified version of the Annual Returns now required by the Ministry of Health:—

TABLE I.**ANTE-NATAL AND POST-NATAL CLINICS.**

		No. of clinics provided	No. of sessions per month	No. of Women who attended.	No. of women in col. 4 who had not attended a clinic since previous confinement.	Total attendances.
(1)		(2)	(3)	(4)	(5)	(6)
Antenatal	} 1 (antenatal and post- natal)		4	57	47	155
Postnatal				7	7	27

TABLE II.**DOMESTIC HELPS.**

(a) Number of Domestic Helps employed at 31st December, 1949:

(1) Whole-time	...	...	...	6
(2) Part-time	...	...	...	24

(b) Number of cases where Help was provided ... 185

TABLE III.**HOME NURSING.**

No. of Home Nurses employed on 31-12-49.		Equivalent of Whole- time services devoted to Home Nursing in Cols. (1) and (2).	No. of Visits paid by Home Nurses during the period.	No. of cases attended by Home Nurses during the period.
Whole-time on Home Nursing. (1)	Part-time on Home Nursing. (2)	(3)	(4)	(5)
1	39	12.6	71,765	3,276

INFANT WELFARE CENTRES.

TABLE IV.

Number provided. (1)	No. of sessions per month. (2)	No. of children who attended. (3)	No. of children who first attended and who were on first attendance:		No. of children who were at end of year:		Total No. of attendances made by children included in col. 3:	
			Under 1 year old. (4)	Over 1 year old. (5)	Under 1 year old. (6)	Over 1 year old. (7)	Under 1 year old. (8)	Over 1 year old. (9)
16	21	670	468	202	337	686	2535	4736

HEALTH VISITING.

TABLE V.

No. of Health Visitors employed:		Equivalent of Cols. 1 and 2 in terms of whole-time Health Visitors. (3)	No. of Visits Paid by Health Visitors:							
Whole-time on Health Visiting. (1)	Part-time on Health Visiting. (2)		Expectant Mothers:		Children under 1 year old:		Children between 1 and 5 years old:		Other Classes:	
			First Visits. (4)	Total Visits. (5)	First Visits. (6)	Total Visits. (7)	First Visits. (8)	Total Visits. (9)	First Visits. (10)	Total Visits. (11)
2	34	10.2	489	3251	814	7626	Not obtainable	9530	Nil.	Nil.

**MIDWIVES' ACTS, 1902-1936.—RETURN OF LOCAL SUPERVISING
AUTHORITY.**

1. Maternity Cases Attended.

TABLE VI.

(1)	No. of Maternity Cases in the area attended by Midwives during the period:					
	Domiciliary Cases:		Cases in Institutions:		Total cases:	
	As Midwives. (2)	As Maternity Nurses. (3)	As Midwives. (4)	As Maternity Nurses (5)	As Midwives (6)	As Maternity Nurses. (7)
Midwives employed by:						
(a) the Authority ...	104	228	Nil.	Nil.	104	228
(b) Voluntary Organisations	Nil.	Nil.	151	4	151	4
(c) Hospital Management	Nil.	Nil.	166	96	166	96
Committees ...	Nil.	Nil.	3	121	3	121
Midwives in private practice	—	—	—	—	—	—
Totals ...	104	228	320	221	424	449

2 Midwives in Private Practice.

(a) Domiciliary	..	...	...	2	
(b) In Nursing Homes	..	..	...	6	
				—	8

3 Medical Aid under Section 14 (1) of the Midwives Act, 1918.

No. of cases in which medical aid was summoned during the period:—

(a) for domiciliary cases:—

(i) Where the Medical Practitioner had arranged to provide Maternity Medical Services under the National Health Service Act, 1946

...	...	...	24	
(ii) Other cases	...	...	4	
			—	28

(b) for cases in Institutions ... 10

4. Administration of Analgesia.

(a) Number of Midwives in practice in the area qualified to administer Analgesics:—

(i) Domiciliary	...	...	...	29	
(ii) In Institutions	...	...	...	13	...
				—	42

(b) Number of sets of Analgesic apparatus in use by the Authority's midwives ... 30

(c) Number of cases in which Analgesics were administered in domiciliary practice:—

(a) by midwives	...	...	...	75	
(b) by maternity nurses	...	...	...	106	
				—	181

TABLE VII

AMBULANCE SERVICES.

(1)	No. of Vehicles at 31-12-48. (2)	Total No. of calls. (3)	Total No. of patients carried. (4)	Number of accident and emergency calls included in col. (3). (5)	Total mileage during period. (6)
Ambulances	9	1788	1842	185	75,406
Cars	...See below*	2128	2579	25	94,512

NOTE:—*The Sitting Case Car Service was provided by voluntary drivers enrolled by the British Red Cross Society and by taxis; at the end of the year 71 voluntary drivers were on the roll, and 61 taxi proprietors had agreed to provide this service.

NOTIFIABLE DISEASES, 1949.

	Smallpox	Scarlet Fever	Diphtheria	Erysipelas	Pulmonary Tuberculosis	Other Forms of Tuberculosis	Pneumonia	Undulant Fever.	Acute Poliomyelitis	Acute Polio-Encephalitis	Dysentery	Sonne Dysentery	Puerperal Pyrexia	Ophthalmia Neonatorum	Measles	Whooping Cough	Encephalitis Lethargica.	Cerebro-Spinal Fever	Malaria	Cerebro-Spinal Meningitis	Food Poisoning
Appleby ..	—	1	—	2	1	—	—	—	—	—	—	—	—	—	6	6	—	—	—	1	—
Kendal ..	—	4	—	1	23	2	—	—	3	—	—	—	2	—	252	101	—	—	—	—	—
Lakes ..	—	1	—	1	4	1	4	—	3	—	—	—	—	—	7	12	—	—	—	—	1
Windermere	—	—	—	—	2	—	—	—	—	—	—	—	—	—	2	12	—	—	—	—	—
N Westmorland	—	19	—	5	6	6	18	—	6	—	—	—	—	—	34	104	—	—	—	—	1
S Westmorland	—	8	—	—	7	2	5	—	5	2	—	—	—	—	127	69	—	—	—	—	—
Totals 1949	—	33	—	9	43	11	27	—	17	2	—	—	2	—	428	304	—	—	—	1	2
Totals 1948	—	51	—	5	44	21	16	—	—	1	6	3	5	1	632	140	—	—	4	1	2

Notifiable Diseases (other than Tuberculosis) during the year 1949.

Ages.	Smallpox.	Scarlet Fever.	Diphtheria.	Erysipelas.	Pneumonia.	Undulant Fever	Acute Polio- myelitis.	Acute Polio- encephalitis	Dysentery	Sonne Dysentery	Puerperal Pyrexia.	Ophthalmia Neonatorum.	Measles	Whooping Cough	Encephalitis Lethargica	Cerebro-Spinal Fever	Malaria	Cerebro-Spinal Meningitis	Food Poisoning
Under 1 year ..	—	—	—	—	1	—	—	—	—	—	—	—	10	18	—	—	—	—	—
1 " ..	—	—	—	—	—	—	1	—	—	—	—	—	38	36	—	—	—	—	—
2 " ..	—	5	—	—	2	—	—	—	—	—	—	—	56	38	—	—	—	—	—
3 " ..	—	—	—	—	1	—	1	—	—	—	—	—	53	49	—	—	—	—	—
4 " ..	—	2	—	—	—	—	1	—	—	—	—	—	61	35	—	—	—	—	—
5 " ..	—	10	—	—	2	—	1	2	—	—	—	—	181	119	—	—	—	—	—
10- " ..	—	11	—	—	—	—	4	—	—	—	—	—	17	5	—	—	—	—	—
15- " ..	—	3	—	—	2	—	2	—	—	—	—	—	2	—	—	—	—	—	1
20- " ..	—	1	—	2	—	—	3	—	—	—	1	—	9	1	—	—	—	—	—
35- " ..	—	1	—	2	5	—	3	—	—	—	1	—	—	1	—	—	—	1	—
45- " ..	—	—	—	1	7	—	1	—	—	—	—	—	1	2	—	—	—	—	—
65 and over ..	—	—	—	4	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total Cases notified	—	33	—	9	27	—	17	2	—	—	2	—	428	304	—	—	—	1	2
Cases admitted to Hospital ..	—	24	—	—	3	—	15	2	—	—	2	—	1	1	—	—	—	1	1
Total Deaths ..	—	—	—	—	3	—	2	—	—	—	—	—	1	1	—	—	—	—	—

